and the second s										Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECOI Effective December 29, 1999										(191	16	61	136	
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMAI		ENTITY	OR	OTHER SMALL		
FOR			NUMBER FILED			NUMBER EXTRA			RATI	E	FEE	1	RATE	FEE	
BASIC FEE											345.00	OR		690.00	
TOTAL CLAIMS			minus 20=			. /			X\$ 9	=		OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =						X39=			OR	X78=		
MULTIPLE DEPENDENT CLAIM PRESENT										=		OR	+260=	/	
* If the difference in column 1 is less than zero, enter "0" in column 2									TOTA	L		OR	TOTAL	150	
į	RCS CLAIMS AS AMENDED - PART II											•	OTHER		
			imn 1)	ke.		Column 2) HIGHEST	(Column 3)		SMAL	L E	NTITY	OR I I	SMALL		
AMENDMENT A		AF	NNING TER DMENT		Pi	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total ·	. /		Minus	••	20	=		X\$ 9	-		OR	X\$18=		
	Independent FIRST PRESE	·	<u> </u>	Minus	ZENIE		=		X39=			OR	X78=		
-	rino i Priese		N OF MI	JETIPLE DE	EN	DENT CLAIM			+130=			OR	+260=		
			•			•		L	TOT			OR	TOTAL ADDIT, FEE		
	(Column 1) (Column 2) (Column 3)								ADDIT, FI	EEL	*******		ADDII. PEEI		
AMENDMENT B		REMA • AF	NIMS NINING TER DMENT		PS	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•		Minus	**		=		X\$ 9=			OR	X\$18=		
	Independent	•		Minus	***		=	ı	X39=			OR	X78=		
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+130=				+260=		
									TOTA	AL		OR	TOTAL		
				,				A	DDIT. FE	EEL		OR	ADDIT. FEE		
	S. S		mn 1)		_	Column 2) HIGHEST	(Column 3)	_		_					
MENDMENT C		AF	NNING TER DMENT		PF	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total			Minus	**		=	ſ	X\$ 9=			OR	X\$18=		
AME	Independent	•		Minus	***		=	ļ	X39=	1		OR	X78=	· · ·	
	FIRST PRESE	NTATIO	N OF MI	JLTIPLE DEF	PENE	DENT CLAIM		-		\dashv					
• ;	f the entry in colur	mn 1 is !e	ss than th	na antry in colu	mr 2	write "0" in col	umn 3	L	+130=		,	OR	+260=		
•• I	f the "Highest Nur If the "Highest Nur	mber Pre	viously Pa	id For IN THI	S SPA	ACE is less tha	n 20, enter "20."	Al	TOTA DDIT. FE		·	OR	TOTAL ADDIT. FEE		
	The "Highest Num							r four	od in the	ann	ronriata box	in coli	umn 1		